NOTES FROM THE MEDICAL PRESS

IN CHARGE OF
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AFTER EFFECTS OF DIPHTHERIA ON THE HEART.—In an article on the after effects of diphtheria on the heart in the Journal of the American Medical Association Dr. F. W. White says: "I have no doubt that much of the cardiac dilatation which was often seen in the first few weeks after leaving the hospital could have been avoided by more intelligent restraint of these children at home. Even the milder cases should be carefully watched and whatever causes shortness of hreath, pallor or fatigue, or affects the heart unfavorably hy notshly increasing the pulse rate, causing irregularity or any increase in the cardiac area should at once be stopped, whether it consists of running, walking, playing or even in simply being out of bed. The heart must be given ahundant opportunity to rest and recover its normal function. This is the only conservative treatment and the only way to avoid permanent damage to the heart in some instances."

All the severe cases require rest in hed and eareful watching of the heart for months or years afterward.

RYE BREAD IN DIABETES.—The same journal quoting from the Intercolonial Medical Journal of Australasia says: "Lidwill was led to the use of rye hread in diabetes by the craving and empty feeling of which patients on the so-called diabetic diets complained. He found that rye hread is satisfying, stopping that empty feeling, and that patients cat hut little of it in proportion to wheat hread, about a loaf and a half sufficing for a week. It contains hut little digestihle starch; it is laxative; the sugar in the urine diminishes considerably during

its use; patients do not tire of it, and it is cheap. Its greatest use is in the milder form of glycosuria occurring in the middle-aged or old."

PHARMACISTS' MEDICINE DROPPERS.—The New York Medical Journal quoting from Presse Medicale says: Jacobson considers the ordinary medicine droppers used in drug stores to be dangerous instru-

ments, because of their inaccuracies. He finds that the size of the drop which falls from one dropper may be nearly three times the size of a drop of the same fluid from another dropper.

THE CARE OF THE FEET .- Dr. Crawford in an article on the care of soldiers' feet in the British Medical Journal, quoted by the New eare of soldiers feet in Edition Technology of the York and Philadelphia Medical Journal, says: As a rule, they do not keep their feet as clean as they should; frequent thorough washing should be enforced. If the feet are naturally tender they should be soaked for a time in a solution of alum, salt, or saltpetre, and water the night before a march and zinc or boric acid rubbed over them in the morning. The common causes of inflammation and swelling are rubbing by a seam in the shoes, a wrinkle or projection in the sock, grit in the shoes, and want of cleanliness. Ascertain the cause and remove it: soak the feet in cold water or alum, and see that clean socks are worn after marches. Any tendency to sweaty feet must be attended to; scrupulous cleanliness is necessary, and boric acid or oxide of zine should be dusted inside the socks every morning. Blisters are caused by irritation from pressure; they should be opened and a pad and ban-dage applied. A hard corn should be carefully pared and pressure removed by wearing roomy boots. Soft corns are best treated by wearing digitated socks, or by applying cotton-wool between the toes to absorb the perspiration; this converts them into hard corns when they can be appropriately treated. Inflamed corns are relieved by lead and opium lotion. A common cause of chilblains is sitting at the fire with cold wet socks and boots on. The affected parts should be gently rubbed with a stimulating liniment, and thick socks worn. All nails should be cut square. Slight cases of ingrowing toe nail can be cured by pressing a nick of cotton under the nail. Severe cases must be operated upon.

THE THERAPEUTIC USE OF SUNSHINE.—The Medical Record in an editorial says: The bencficial effects of sunlight have been known to the peoples of the earth from very early times, and we find repeated references to its use in the writing of the old Greek physicians. The subject was again rejuvenated during the last century and has received considerable scientific attention more recently. The favorable effects of general sun-baths may be traced to the factors of increased perspiration, with a corresponding increase in the excretion of deleterious substances; a prolonged hyperemia of the skin, resulting in a derivation of the blood from the internal organs to the surface of the body; a stimu-

lation of the metabolic processes; a direct and peculiar action on the blood and the vessels; and finally a bactericidal effect in the superficial layers of the skin. The indications for the use of sun-baths may be found in diseases of metabolism (diabetes, gout, etc.), in congestions in the internal organs (cardiac defects, asthma), and in anemia, chlorosis, general weakness or protracted convalescence, skin diseases, scrofula and rickets.

Bernhard reports successful cures in lupus from exposure during a considerable period to the rays of the sun alone without the use of any accessories. Furuncles, phlegmonous processes, and all streptococcus infections were greatly improved, and the results in tuberculosis of the superficial glands and joints were very favorable. In addition to bactericidal powers, the sun's rays also possess other therapeutic properties. Epithelial formation is visibly promoted by exposure to the sunlight and flabby granulations are stimulated to renewed and healthy growth. He also notes the favorable action of sunlight in cases where a transplantation of skin flaps has been performed, the adhesion of the flaps and their final attachment being markedly hastened.

The suggestious contained in these are interesting and timely, and among other things may exert an influence upon our present methods of wound treatment. Occlusive dressings have been quite universally employed for both primary and secondary wounds, although there is apparently no reason why, after the danger of infection is once past, factors with such well marked healing tendencies as have been proved to be associated with sunlight and fresh air, should be entirely excluded. Sunlight is an agency which is easily obtained and readily applied and as a therapeutic factor in surgical procedures, it is deserving of more extended attention and study.

